

Remarks/Arguments

A. Pending Claims

Claims 1, 42, 48-54, 62, 64, 65, 160 and 165 have been amended. Claims 1, 4-6, 9-14, 16-21, 24-37, 39-42, 45-65, and 158-165 are pending in the case.

B. Claim Objections

The Examiner objected to claims 1, 48, 54, 62 and 64 due to informalities. More specifically, the Examiner suggested that the term "least" was missing from the claims. (See Office Action, page 2). By this response, Applicant has amended the claims to include the term "least", thereby correcting the informalities. Applicant respectfully requests removal of the objection.

C. 35 U.S.C. § 101

The Examiner rejected claims 54-61 under 35 U.S.C. §101 as being directed to non-statutory subject matter. More specifically, the Examiner states:

...With regard to claim 54, the method claimed by the Applicant is not tied to another statutory class as it recites the limitations "associating a loss type", "providing at least one request", "determining one or more loss types", "applying one or more business rules", and "assessing at least one total fraud potential indicator". The method claimed does not include a particular machine, nor does it transform the data. The method steps recited in the body of claim 54 could reasonably be interpreted to encompass a human being performing these steps. Claims 55 - 61 have similar deficiencies as noted above with regard to claim 54 and therefore are rejected for substantially the same reason.

The above deficiency can be overcome by expressly stating in the body of the claimed method, using a computer (apparatus) or terminal, for example, which makes the claim useful.

(Office Action, pages 2-3)

Although Applicant does not necessarily agree with the rejection, Applicant has amended claim 54 to recite additional features that include “a computer system applying one or more business rules...” Applicant submits that amended claim 54 and the claims depending therefrom are directed to statutory subject matter. Applicant respectfully requests removal of the rejection under 35 U.S.C. §101.

D. The Claims are Not Obvious over Torres in view of Pendleton pursuant to 35 U.S.C. § 103(a)

The Examiner rejected claims 1, 4 - 6, 9 -14, 16 - 21, 24 - 27, 29 - 31, 39 - 42, 45 - 63, 158 - 159, and 161 under 35 U.S.C. 103(a) as obvious over U.S. Patent Publication No. 2005/0043961 to Torres et al. (“Torres”) in view of U.S. Patent No. 6,253,186 to Pendleton Jr. (“Pendleton”). Applicant respectfully disagrees with these rejections.

In order to reject a claim as obvious, the Examiner has the burden of establishing a *prima facie* case of obviousness. *In re Warner* et al., 379 F.2d 1011, 154 U.S.P.Q. 173, 177-178 (C.C.P.A. 1967). To establish a *prima facie* obviousness of a claimed invention, all of the claim limitations must be taught or suggested by the prior art. *In re Royka*, 490 F.2d 981, 180 U.S.P.Q. 580 (C.C.P.A. 1974). (Emphasis added).

Independent Claim 1

Amended claim 1 recites a combination of features including:

associating a loss type value with each of at least two of a plurality of loss types, wherein the loss type value is a numerical value that varies by loss type, wherein the loss type values for the loss types are indicative of a potential for fraud associated with a respective loss type;

...
determining, for the at least one request, one or more loss types from among the plurality of loss types associated with the loss type values;

...applying one or more business rules to the at least one request data element to determine a fraud potential indicator, wherein at least one of the

applied business rules applies a loss type multiplier whose value includes the loss type value associated with at least one of the one or more determined loss types of the plurality of loss types, wherein the value of the loss type multiplier is indicative of a potential for fraud associated with the loss types for the at least one request.

Claim 1 is directed to a method that includes determining a loss type of a request from among a plurality of loss types. These loss types have an associated loss type value that can be indicative of the loss type and a loss type multiplier based on the loss type value. For example, as described in Applicant's specification:

In some embodiments, the loss type may indicate fraud. For example, request types that are unusual or difficult to verify may indicate more potential for fraud. In various embodiments, a loss type multiplier may be applied (multiple loss types may be added). For example:

Failure to Yield = 7

Hit and Run = 12

Over Center/Head on/Side Swipe = 5

Single Vehicle Collision = 7

Insured Failed to Obey Rules and Regulations = 5

claimant's Unattended Vehicle Rolled Causing Collision = 5

Other multipliers may also be used.

(Specification, page 28, lines 4-16)

The loss type multiplier includes, as described above, the loss type value associated with the determined loss type from among the plurality of loss types. Thus, in the example set forth in the specification, if a request were determined to relate to a Failure to Yield loss type, the loss type multiplier would include a value of 7 for the Failure to Yield loss type. In other words, the method described in claim 1 can include determining a fraud potential indicator by applying a business rule that uses a loss type multiplier, where the loss type multiplier includes a loss type value that is associated with a type of loss of the request.

With respect to previously submitted claim 1, the Examiner states:

Torres teaches a method, comprising:

associating a loss type value with each of at two of a plurality loss types, wherein the loss type value varies by loss type, wherein the loss type values for the loss types are indicative of a potential for fraud associated with a respective loss type (paragraphs [0019] and [0021]) where Torres discloses automated data gathering and decision processes. This data is then classified. The Examiner equates this to gathering loss type data and associating that data with a variable (loss type value) which aids in the detection of potential fraud, where the loss type data is can be insurance claim data;

...
determining one or more loss types for the at least one request, wherein the one or more loss types for the at least one request are one or more of the plurality of loss types (paragraphs [0021], [0040], [0041], [0044], [0045], and [0046]) where Torres discloses a loss type which includes falsification of age and false identity;

(Office Action, pages 4-5)

Applicant respectfully disagrees. Portions of Torres cited by the Examiner state:

[0019] The system and method comprises three stages, including identity verification, detection and investigation. The first stage of identity verification is an automated batch process for providing automated data gathering and decision processes carried out with the goal of resolving as many cases as possible without human intervention. In a document-oriented application, the classification stage begins with the arrival of an input document represented by a dataset. In the detection stage, human judgment may be employed to resolve ambiguities, obtain additional data, and arbitrate borderline classification decisions. The goal is to classify the cases that the previous stage was unable to resolve and to select the high-risk cases to forward to the third stage for a more thorough and time-consuming investigation by highly skilled investigators.

[0021] An embodiment of the present invention is a method for identification, detection and investigation of maleficent acts, comprising the steps of receiving one or more transaction datasets, verifying each transaction dataset identity and classifying each transaction dataset into a first category, a second category and a third category, detecting and

arbitrating ambiguities in each transaction dataset in the second category for reclassifying into the first category and the third category, investigating each transaction dataset in the third category for affirming the third category classification of a first group of investigated datasets and reclassifying the third category classification of a remaining second group of investigated datasets into the first category classification, enabling transaction datasets in the first category, and disabling transaction datasets in the third category...

(Torres, para. [0019] and [0021])

Torres describes a three stage technique that includes identity verification, detection and investigation. The technique includes receiving transaction datasets, and classifying the datasets into one of three categories (e.g., a first category, a second category and a third category). Ambiguities of the datasets in the second category are considered so that the datasets initially classified in the second category are reclassified in the first or third category. Datasets of the third category are investigated to affirm their classification in the third category or to reclassify them to the first category. Accordingly, Torres appears to disclose a technique that includes initially classifying datasets into one of three subsets and subsequently categorizing the datasets into two of the three categories. Torres does not appear to disclose at least the feature of, associating a loss type value with each of at least two of a plurality loss types, wherein the loss type value is a numerical value that varies by loss type and is indicative of a potential for fraud associated with a respective loss type, in combination with other features of the claim.

In the above quoted portion of the Office Action, the Examiner appears to suggest that falsification of age and false identity are “loss types” (Office Action, page 4). Applicant respectfully disagrees. In any event, Torres does not appear to teach or suggest at least the feature of: “wherein the loss type values for the loss types are numerical values indicative of a potential for fraud associated with a respective loss type”, in combination with other features of the claim.

A portion of Torres cited by the Examiner states:

[0040] Turning to FIG. 2, FIG. 2 shows a functional flow diagram depicting the process 200 according to the present invention. The process 200 comprises three stages: identity verification and classification 220, maleficent act detection 230 and maleficent act investigation 240. Multiple procedures may be involved in each stage and the automated classification technologies may vary with the application. The process starts with an automated classification process 220 where identifying information is extracted from input documents or transaction datasets 210 and used to search databases containing the records of individuals. Identity data can consist of biometric data and/or standard identification such as name, address, phone number, etc. This data can then be matched against a variety of databases, such as biometric, public records, etc., to confirm whether the identity exists and if the person is, in fact, who he/she claims to be. In addition, identification analytics can be employed to look for inconsistent representations of identity where, for example, a person claims to be 42 years old when the identification data indicates the age of 10 years old. Analytics may also detect fraudulently manufactured identification, for example, a created false identification or assumption of another person's identification. Such identifications may be rare, but they are immediate and authoritative, and provide the earliest warning of the potential maleficent activities. In the identity verification and classification stage 220, transaction datasets 210 are received by this stage from various sources. The transaction datasets 210 may be airline reservations, way bills for cargo, border crossings, Patriot Act transactions, insurance claims, underwriting insurance documents, credit applications, etc. The identity verification and classification stage 220 classifies individuals identified in the transaction datasets, sending datasets associated with high risk individuals 270 to the investigation stage 240, and sending datasets associated with medium risk individuals 272 to the detection stage 230, and categorizing as approved 260 those datasets associated with low risk individuals 274.

(Torres, para. [0040])

Paragraph [0040] and FIG. 2 of Torres disclose a process including three stages: identity, verification and classification. Identity data can consist of biometric data and/or standard identification such as name, address, phone number, etc. This data can then be matched against a

variety of databases, such as biometric, public records, etc., to confirm whether the identity exists and if the person is, in fact, who he/she claims to be. In addition, identification analytics can be employed to look for inconsistent representations of identity where, for example, a person claims to be 42 years old when the identification data indicates the age of 10 years old. Analytics may also detect fraudulently manufactured identification, for example, a created false identification or assumption of another person's identification. Torres, thus, appears to disclose categorizing persons based on their identity data. Torres does not appear to disclose a loss type, much less the features of, determining, for the at least one request, one or more loss types from among the plurality of loss types associated with the loss type values in which the loss type value is a numerical value that varies by loss type whose value is indicative of indicative of a potential for fraud associated with the loss type value, in combination with other features of the claims.

In the Office Action, the Examiner also states:

Torres fails to explicitly teach a loss type and a method comprising: applying one or more business rules to the at least one request data element to determine a fraud potential indicator; wherein at least one of the applied business rules applies a loss type multiplier whose value includes the loss type value associated with at least one of the one or more determined loss types of the plurality of loss types; and, wherein the value of the loss type multiplier is indicative of a potential for fraud associated with the loss types for the at least one request.

Pendleton teaches a method comprising:

applying one or more business rules (column 3, lines 65 -67 and column 9, lines 35 -64) to the at least one request data element to determine a fraud potential indicator (column 2, lines 18 - 31 and column 7, lines 4 - 59) where Pendleton describes an expert system which is equated to business rules;

wherein at least one of the applied business rules (column 3, lines 65 - 67 and column 9, lines 35 - 64) applies a loss type multiplier whose value includes the loss type value associated with at least one of the one or more determined loss types of the plurality of loss types (column 2, lines 18 - 31) where the Examiner interprets multiplier as a predefined number or value; and,

wherein the value of the loss type multiplier is indicative of a potential for fraud associated with the loss types for the at least one request (column 2, lines 18 - 31 and column 7, lines 4 - 59).

(Office Action, page 5)

Applicant respectfully disagrees. Pendleton, including portions cited by the Examiner, states:

The step of processing the data preferably includes the steps of: selecting elements of information from the data stored in the claim file; encoding the selected elements of information to produce an encoded claim file; and storing the encoded claim file. The encoded claim file is preferably sorted by supplier or provider code to produce a sorted, encoded claim file. The processing step further comprises the steps of reading data from the sorted encoded claim file, and analyzing this data by means of a neural network to produce the fraud indicator for the selected supplier or provider. In a preferred embodiment, the analyzing step includes producing a plurality of fraud indicators based on a plurality of claims submitted by the selected supplier or provider, and computing a composite fraud indicator from the plurality of indicators. In at least one embodiment of the invention, the composite fraud indicator is computed by averaging a plurality of fraud indicators for the selected provider or supplier.

(Pendleton, col. 2, lines 8-31)

Block 60 represents the process by which a neural network analyzes the claim line information in claim file 48 to produce a number or score for each claim line which is viewed as a fraud index or indicator. This value is stored in memory 62 and is accumulated (block 64) for each supplier or provider. In one embodiment of the invention, the process of accumulating the data involves simply adding the fraud indicators produced for each claim line to produce a total for a particular supplier or provider. Composite fraud data is stored in memory 66 for subsequent use in the computational process of branch B. After storage, the system determines, in block 68, if additional data remains to be processed. If so, the process of reading the next claim line block 52) begins. The process of analyzing each claim line continues until block 54 detects a change in provider number. When the provider number changes, and the system is not examining the first record in claim file 48, the system determines that all lines for the prior provider have been analyzed and proceeds to branch B. In block 58, a computation is performed on the composite fraud data

stored in block 66 to compute a composite fraud indicator. In one embodiment of the invention, this computation involves computing an average fraud indicator for the claim lines analyzed for a particular provider. In other words, the fraud indicators stored in memory 62 for each claim line analyzed for a particular provider are summed and divided by the total number of claim lines. This approach represents one of several which may be used. Other approaches include computing a weighted average of the individual fraud indicators, or selecting a subset of the indicators for use in computing the composite fraud indicator. After the composite fraud indicator is computed, it is compared to a threshold number which is based upon prior experience (block 70). The threshold number may be arbitrarily fixed or, alternatively, may be dynamic in the sense of being periodically or continuously updated by the system as additional data is processed. If the composite fraud indicator exceeds the threshold, the results for the subject supplier or provider are written to neural network (NN) data base file 72 in a process represented by block 74. Only information on providers exceeding the threshold is stored in NN data base file 72. Data base file 72 serves as an input to a data base tracking system which provides for continuity across several days (or other period of interest). In the event the fraud indicator exceeds the threshold value, provider results are also written to statistics file 76 in a process represented by block 78. If the composite fraud indicator does not exceed the threshold, the system asks if a report is to be provided on all providers (block 80). If so, the provider results are written to statistics file 76. Statistics file 76 is essentially a report file which can be viewed by the user on line or printed, at the user's discretion. The system then branches as indicated to C and proceeds with neural network analysis of the first claim line for the new provider. This process continues until the end of sorted encoded claim file 48 is detected by block 68.

(Pendleton, col. 7, lines 4-59)

Pendleton discloses producing a plurality of fraud indicators based on claims submitted by a selected supplier or provider and computing a composite fraud indicator from the plurality of fraud indicators. The composite fraud indicator can be computed by averaging a plurality of fraud indicators for the selected provider or supplier. Pendleton also discloses that a composite fraud indicator can be based on adding, averaging, or weighted average of multiple individual fraud indicators. Pendleton thus discloses producing a plurality of fraud indicators based on claims

submitted. Pendleton, however, does not appear to teach or suggest a loss type multiplier. In any event, Pendleton taken alone or in hypothetical combination with the cited art does not appear to teach or suggest at least the feature applying one or more business rules to the at least one request data element to determine a fraud potential indicator, wherein at least one of the applied business rules applies a loss type multiplier whose value includes the loss type value associated with at least one of the one or more determined loss types of the plurality of loss types, wherein the value of the loss type multiplier is indicative of a potential for fraud associated with the loss types for the at least one request, in combination with other features of claim 1.

For at least the reasons stated above, Applicant submits that claim 1 is allowable over the cited art.

Independent Claims 42, 48, 54, 62, and 64

Amended claim 42 recites a combination of features including:

associate a loss type value with each of at least two of a plurality of loss types, wherein the loss type value is a numerical value that varies by loss type, wherein the loss type values for the loss types are indicative of a potential for fraud associated with a respective loss type;

determine, for the at least one request, one or more loss types from among the plurality of loss types associated with the loss type values;

apply one or more business rules to the at least one request data element to determine a fraud potential indicator, wherein at least one of the business rules applies a loss type multiplier whose value includes the loss type value associated with at least one of the one or more determined loss types of the plurality of loss types, wherein the value of the loss type multiplier is indicative of a potential for fraud associated with the loss types for the at least one request.

Amended claim 48 recites a combination of features including:

associating a loss type value with each of at least two of a plurality of loss types, wherein the loss type value varies by loss type, wherein the loss type values for the loss types are indicative of a potential for fraud

associated with a respective loss type;

... applying one or more business rules to the at least one request data element to determine a fraud potential indicator, wherein at least one of the one business rules applies a loss type multiplier whose value includes the loss type value associated with at least one of the one or more determined loss types of the plurality of loss types, wherein the value of the loss type multiplier is indicative of a potential for fraud associated with the loss types for the at least one request.

Amended claim 54 recites a combination of features including:

associating a loss type value with each of at least two of a plurality loss types, wherein the loss type value is a numerical value that varies by loss type, wherein the loss type values for the loss types are indicative of a potential for fraud associated with a respective loss type;

determining, for at least one request relating to one or more of a plurality of insurance claims, one or more loss types from among the plurality of loss types associated with the loss type values;

...applying one or more business rules to the at least one request relating to one or more of a plurality of insurance claims to determine a fraud potential indicator, wherein at least one of the business rules applies a loss type multiplier whose value includes the loss type value associated with at least one of the one or more determined loss types of the plurality of loss types, wherein the value of the loss type multiplier is indicative of a potential for fraud associated with the loss types for the at least one request.

Amended claim 62 recites a combination of features including:

associate a loss type value with each of at least two of a plurality of loss types, wherein the loss type value varies by loss type, wherein the loss type values for the loss types are numerical values that are indicative of a potential for fraud associated with a respective loss type;

determine, for at least one request relating to one or more of a plurality of insurance claims, one or more loss types from among the plurality of loss types associated with the loss type values;

apply one or more business rules to at least one request to determine a fraud potential indicator, wherein at least one of the business rules applies a loss type multiplier whose value includes the loss type value associated with at least one of the one or more determined loss types

of the plurality of loss types, wherein the value of the loss type multiplier is indicative of a potential for fraud associated with the loss types for the at least one request.

Amended claim 64 recites a combination of features including:

associating a loss type value with each of at least two of a plurality of loss types, wherein the loss type value is a numerical value that varies by loss type, wherein the loss type values for the loss types are indicative of a potential for fraud associated with a respective loss type;

determining, for at least one request relating to one or more of a plurality of insurance claims, one or more loss types from among the plurality of loss types associated with the loss type values;

applying one or more business rules to at least one request relating to one or more of a plurality of insurance claims to determine a fraud potential indicator, wherein at least one of the business rules applies a loss type multiplier whose value includes the loss type value associated with at least one of the one or more determined loss types of the plurality of loss types, wherein the value of the loss type multiplier is indicative of a potential for fraud associated with the loss types for the at least one request.

For at least reasons similar to those set forth above with respect to claim 1, Applicant submits that the cited art does teach or suggest at least these features of claims 42, 48, 54, 62, and 64 in combination with the other features of the claims.

Applicant submits that many of the claims dependent on claims 1, 42, 48, 54, 62, and 64 are separately patentable. For example, claim 14 recites a combination of features including:

wherein the threshold value is adjusted to control the number of requests with at least one total fraud potential indicator exceeding the threshold value.

With regard to claim 14, the Examiner states:

Torres fails to teach a method wherein the threshold value is adjusted to control the number of requests with at least one total fraud potential indicator exceeding the threshold value.

Pendleton teaches a method wherein the threshold value is adjusted to

control the number of requests with at least one total fraud potential indicator exceeding the threshold value (column 7, lines 41 -44).

Applicant disagrees that the features of claim 14 are taught or suggested by Pendleton. The cited portion of Pendleton states:

If the composite fraud indicator exceeds the threshold, the results for the subject supplier or provider are written to neural network (NN) data base file 72 in a process represented by block 74.
(Pendleton, col. 7, lines 41-44)

Pendleton discloses the possibility of a fraud indicator exceeding a threshold. Pendleton, however, does not appear to teach or suggest the feature of, "wherein the threshold value is adjusted to control the number of requests with at least one total fraud potential indicator exceeding the threshold value," in combination with other features of the claim.

E. The Claims are Not Obvious over Torres in view of Pendleton and Forman pursuant to 35 U.S.C. § 103(a)

The Examiner rejected claims 128, 160, and 162 - 164 under 35 U.S.C. 103(a) as obvious over Torres in view of Pendleton and in further view of U.S. Patent No. 6,826,536 to Forman ("Forman"). For at least reasons discussed above with respect to claim 1 and the additional reasons set forth below, Applicant submits that claims 128, 160, and 162 - 164 are allowable over the cited art.

Claim 160 describes a combination of features including: "wherein the loss type multiplier comprises at least one negative value, wherein the negative value is associated with a contra-indication of fraud for a loss type associated with the at least one request."

With respect to claim 160, the Examiner states:

Torres and Pendleton fail to teach a method wherein the loss type multiplier comprises at the least negative value wherein the negative value is associated with

a contra-indication of fraud for a loss type associated with the at least one request. Forman teaches a method wherein the loss type multiplier comprises at the least negative value wherein the negative value is associated with a contra-indication of fraud for a loss type associated with the at least one request (column 14, lines 24 - 32) where Forman teaches a fraud trigger flag which indicates increased risk. A negative value is interpreted as a pre-determined value to determine the probability of fraud.

(Office Action, page 22) (emphasis added)

Applicant disagrees that the recited phrase “negative value” can be interpreted to mean “a pre-determined value to determine the probability of fraud”. In any event, Applicant submits that Forman does not teach or suggest the features of claim 160. The cited portion of Forman states:

Another fraud-flag trigger filter, identified as Trigger 5 as shown in FIG. 9, identifies profiling modifiers, which add to the value of a medical procedure, such as the increased risk of an ill patient, or the need for auxiliary procedures, such as extra monitoring, and determines if they are properly being claimed. By profiling the medical providers, it is able to determine if any are billing abusing, placing unnecessary monitoring or placing higher risk values to patients so they collect larger fees.
(Forman, col 14, lines 24-32)

Forman discloses a fraud-flag trigger filter that identifies profiling modifiers which add to the value of a medical procedure, such as increased risk of an ill patient or the need for auxiliary procedures such as patient monitoring. Forman, alone or in combination with the other cited art, does not appear to teach or suggest a loss type multiplier includes at least one negative value in which the negative value is associated with a contra-indication of fraud for a loss type associated with the request, in combination with the other features of claim 160.

Claim 162 describes a combination of features including: “applying one or more business rules to the at least one request data element; wherein at least of the one business rules applies an injury type multiplier based on at least one injury type associated with the at least one request to determine a fraud potential indicator, wherein the value of the injury type multiplier depends on a tendency for fraud associated with at least one injury type associated with the at

least one request.”

With respect to claim 162, the Examiner states:

Forman teaches a method further comprising applying one or more business rules to the at least one request data element; wherein at least of the one business rules applies an injury type multiplier based on at least one injury type associated with the at least one request to determine a fraud potential indicator, wherein the value of the injury type multiplier depends on a tendency for fraud associated with at least one injury type associated with the at least one request (column 10, lines 33 - 38) where Forman teaches a fraud trigger that examines multiple claims, such as injuries, diagnosed by a specific provider.

The cited portion of Forman states:

The no-fault/disability trigger is a data processing filter that examines multiple claims of a given provider for a pattern of repetitive diagnosing of the same injuries or patient conditions and flagging the provider as a possible fraud feisor and the repeatedly diagnosed injury or condition as one that lends itself to fraudulent abuse.

(Forman, column 10, lines 33-38)

Forman discloses a no-fault/disability trigger that examines multiple claims of a given provider for a pattern of repetitive diagnosing and flags the provider as a possible fraud feisor and the diagnosed injury or condition as lending itself to fraudulent abuse. Forman, alone or in combination with the other cited art, does not appear to teach or suggest applying one or more business rules to a request data element in which at least of the one business rules applies an injury type multiplier based on at least one injury type associated with the at least one request to determine a fraud potential indicator and in which the value of the injury type multiplier depends on a tendency for fraud associated with at least one injury type associated with the at least one request, in combination with the other features of claim 162.

Claim 164 describes a combination of features including: “wherein the injury type multiplier comprises at least one negative value, wherein the negative value is associated with a contra-indication of fraud for an injury type associated with the at least one request.”

With respect to claim 164, the Examiner states:

Torres and Pendleton fail to teach a method wherein the injury type multiplier comprises at least one negative value, wherein the negative value is associated with a contra-indication of fraud for an injury type associated with the at least one request.

Forman teaches a method wherein the injury type multiplier comprises at least one negative value, wherein the negative value is associated with a contra-indication of fraud for an injury type associated with the at least one request (column 14, lines 24 - 32).

As noted above with respect to claim 160, the cited portion of Forman discloses Forman discloses a fraud-flag trigger filter that identifies profiling modifiers which add to the value of of a medical procedure, such as increased risk of an ill patient or the need for auxiliary procedures such as patient monitoring. Forman, alone or in combination with the other cited art, does not appear to teach or suggest an injury type multiplier including at least one negative value in which the negative value is associated with a contra-indication of fraud for an injury type associated with the request, in combination with the other features of claim 164.

F. The Claims are Not Obvious over Torres in view of Pendleton and White pursuant to 35 U.S.C. § 103(a)

The Examiner rejected claim 165 under 35 U.S.C. 103(a) as obvious over Torres in view of Pendleton and in further view of U.S. Patent Pub. No. 2002/0091550 by Forman (“Forman”). For at least reasons discussed above with respect to claim 1 and the additional reasons set forth below, Applicant submits that claim 165 is allowable over the cited art.

Claim 165 has been amended to describe a combination of features including: “wherein each of at least two of the plurality of loss types of the plurality of loss types corresponds to a type of vehicle collision, wherein the numerical value of the loss type value varies depending on the type of vehicle collision.”

With respect to claim 165, the Examiner states:

Torres and Pendleton fail to teach a method wherein each of at least two of the plurality of loss types of the plurality of loss types corresponds to a type of vehicle collision.

White teaches a method wherein each of at least two of the plurality of loss types of the plurality of loss types corresponds to a type of vehicle collision (Figure 2; Paragraphs [0037], [0038], [0044], and [0045]).

The cited portions of White state:

[0037] BI--Bodily Injury. An insurance coverage type that pays for injuries suffered by third parties as a result of an incident associated the insured.

[0038] PD--Property Damage. An insurance coverage type that pays for property damage suffered by third parties as a result of an incident associated the insured.

...
[0044] Coll--Collision--Collision Insurance. An insurance coverage type that pays for vehicle damage suffered by the insured.

[0045] MVR--Motor Vehicle Report. A report of the items on an insurance applicant's legal driving record.

(White, 0037, 0038, 0044, and 0045)

White discloses definitions including the "insurance coverage type" of bodily injury, the "insurance coverage type" of property damage, the "insurance coverage type" of collision, and a motor vehicle report. White, alone or in combination with the other cited art, does not appear to teach or suggest wherein each of at least two of a plurality of loss types corresponds to a type of vehicle collision in which the numerical value of the loss type value varies depending on the type of vehicle collision, in combination with the other features of claim 165.

Madill, et al.
10/702,088

G. Additional Remarks

Applicant submits that all claims are in condition for allowance. Favorable consideration is respectfully requested.

If an extension of time is needed, Applicant requests the appropriate extension of time. If any fees are required or overpaid, please appropriately charge or credit those fees to Meyertons, Hood, Kivlin, Kowert, and Goetzel Deposit Account No. 50-1505/5053-64000/EBM.

Respectfully submitted,



Chris D. Thompson
Reg. No. 43,188

Attorney for Applicant

MEYERTONS, HOOD, KIVLIN, KOWERT & GOETZEL, P.C.
P.O. BOX 398
AUSTIN, TEXAS 78767-0398
(512) 853-8800 (voice)
(512) 853-8801 (facsimile)

Date: 4-27-2009